<u> </u>		PHILIP.		1/ 2/1	G 7	
EXECUTIVE LOBBYING EXPER	NDITURE	REPORT	Execut	# 36 )		
COVERING JANUARY 1 - JUNE 30  COVERING JANUARY 1 - DECEMBER 31(2)  Mail to: the Board of Ethics, 2415 Queil Dr., 3rd Plot OR  Fak to: (225)763-8787 or (225)763-8780		BRUARY 15		E. E		
I. Name Reine A	(バル First		<b>M</b> 1	_ 30	71150	
2. Business Address: 9654 No.	orn's E	cry AD	ate Zip	71106	70 % 0	
Mailing Address	***.	832	100 100 100 100 100 100 100 100 100 100	<u></u>		
A Passiness Phone  Area Code and Telep  4. Total of all executive lobbying expenditures on (Include expenditures from Schedules A and B)  5. Total of all executive lobbying expenditures on (When Applicable) (Include expenditures from Schedules A added to Line 5 should equal Line 6)	ade January ( thr ade July 1 throng Schedulus A and B	h December 31:	\$	0 - 0 -		
7. Did you make an expenditure exceeding \$50 or	a one occasion fo	or an executive t	manch official		© 7√	
From Japuary 1 through June 307 From July 1 through December 31?	Yes [	No No		на 🗆	is .	
If the answer to either question in Number 7:	above is YES, cor	nplete Schedule	A and attach.			
8. Did you make expenditures exceeding the sum	of \$250 for an e	zecutive branch	official:		32	
From January 1 through June 300 From July 1 through December 317	Yes 🖸 Yes 🗖	No No		NA 🗆		
If the sameer to either question in Number 8 a	bove is YES, con	nplete Schedule	A and attach.			
<ol> <li>Did you expend funds for any reception, social officials were invited during this reporting per</li> </ol>	l gathering, or ou fod?	her function to	8		- were	
Yes [	ו	No 1	Missua	numbered	l pages were information	
If the answer to Number 9 above it YES, comp	f the answer to Number 9 shove is YES, complete Schedule B and attach.			Missing numbered pages were blank and had no information on them.		
Forth 507. Rev 7/04	Page	1 of	on the	in.		

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2)	Name of Department and Individual Agency:	
	<ol> <li>Total of all expenditures made January 1 through June 30:</li> </ol>	<b>\$</b>
	<ul> <li>Total of all expenditures made July 1 through December 31: (When applicable)</li> </ul>	s
	d. Total of all expenditures made during the calendar year:	<u> </u>
3)	a. Name of Department and Individual Agency:	<u> </u>
	b. Total of all expenditures made January 1 through June 30:	\$
	c. Total of all expenditures made July 1 through December 31: (When applicable)	* \$
	A. Torol of all expenditures made during the calendar year:	<u> </u>

## CERTIFICATION OF ACCURACY

I hereby certify that the information contained herein is true and correct to the best of my knowledge, information, and belief; that all reportable expenditures have been included herein; and that no information required by LSA-R.S. 49:71 at seq. has been deliberately omitted.

Signature of Lobbyist

Furm 507, Rev. 7J04